Obesity & Pregnancy

Thinking about becoming pregnant?

If you are carrying excess weight, you should talk with your health care provider about the risks of pregnancy.

Make a plan with your health care provider

Make an appointment with your health care provider to create a plan for your pregnancy. This might include:

- weight loss before conception
- nutrition counseling with a dietitian
- creating a goal for healthy weight gain during your pregnancy

Fertility

Obesity can interfere with ovulation, making it difficult to become pregnant. It can also increase the chance of miscarriage and birth defects. Talk with your health care provider about any concerns you may have.

Are you obese?

Obesity is defined as an excessive amount of body fat. Obesity is usually determined by a calculation of your height and weight, known as a Body Mass Index or BMI. Knowing your BMI can help you determine the possible risks for a pregnancy. You are obese if your BMI is over 30. If your BMI is over 40, pregnancy can pose even greater risks. Talk to your health care provider to determine what you can do to have a healthy pregnancy.

Nutritional status	ВМІ
Normal Weight	18.5–24.9
Pre-obesity	25.0-29.9
Obesity Class I	30.0-34.9
Obesity Class II	35.0-39.9
Obesity Class III	Above 40

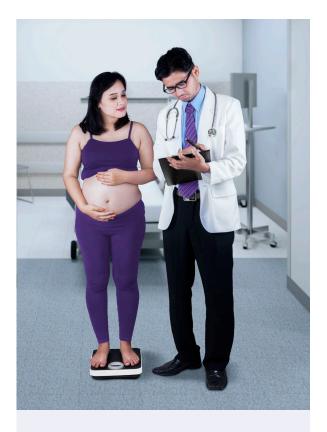
How might obesity affect your pregnancy?

Obesity can increase your risk of gestational diabetes and high blood pressure. These conditions can complicate your pregnancy.

Gestational diabetes

If you are obese, you have a higher chance of developing gestational diabetes during pregnancy. If you have gestational diabetes, you may:

- need to follow a diet or take medication to maintain your blood sugar level
- need to see a specialist if your blood sugar is difficult to control
- need to be carefully monitored by a health care provider
- deliver your baby before your due date



Nutrition Tips

Setting a healthy goal for weight gain early in pregnancy can help both you and your baby. Talk to your provider about the amount of weight you should gain based on your BMI.

- ☐ **Drink plenty of water.** Staying hydrated will keep you more comfortable during your pregnancy. Replace juice and soda with water.
- ☐ Eat small meals and snacks regularly. Eating a variety of foods every few hours will help keep you full and your blood sugar levels steady.
- ☐ Choose healthy snacks that include protein. Nuts, cheese, meat, hummus, beans, and eggs will help you feel full, longer. Avoid deli meats.
- ☐ **Eat plenty of fiber.** Fiber from whole grain bread, cereals, beans, fruit, and vegetables helps you feel full. It also reduces constipation.
- ☐ Stay Active! Do 30–45 minutes of low-impact exercise three days a week. This will help keep your energy level up, boost your mood, and relieve stress while managing your weight gain. Walking, jogging, swimming, and yoga are good exercises to try. Exercise also helps keep your blood sugar level stable.

High blood pressure and pre-eclampsia

Obesity in pregnancy increases your risk of high blood pressure and pre-eclampsia, a serious blood pressure disorder that can occur in pregnancy. If you have high blood pressure or pre-eclampsia, you may need:

- medications to keep your blood pressure under control
- extra monitoring for you and your baby
- to deliver your baby early

Your provider may send you to a specialist to help monitor your baby and blood pressure.

How might obesity affect your labor and birth?

Obesity increases the risk of complications during and after delivery. Understanding risks can help you and your healthcare provider make decisions about your care before and during your delivery.

Going past your due date

Women who are obese are more likely to go past their due date. This may increase your chance of needing to induce labor, even if your body is not ready. Being induced can increase your chances of both a longer labor and delivery by C-section.

While you are in labor

Women who are obese tend to have longer labors. Extra tissue around the tummy often makes it more difficult to monitor you and your baby during labor. Your provider or nurse may need to place monitors into your uterus to track your contractions or your baby's heartbeat.

Difficult epidural placement

Pain control during labor can also be more difficult. Added tissue along the spine can make it difficult or impossible to place an epidural for pain relief.

Longer time spent pushing

Extra weight and tissue can increase the length of time you need to push to deliver vaginally. A vaginal delivery is typically the least risky type of delivery for the parent. As long as you and your baby are healthy, your nurse and healthcare provider's goal will be a vaginal delivery.

If you have been pushing for a long time, your healthcare provider may talk to you about an assisted delivery. This might mean the use of a vacuum or forceps, which can increase the chances of tearing for you, and bruising or other injury for your baby. Your health care provider will discuss these options if needed.

C-sections

Obesity increases the chance of needing a C-section delivery. If you are obese and need a C-section, you:

- may have problems with anesthesia, such as maintaining an airway for breathing or placing spinal anesthesia
- are more likely to have a longer or more difficult surgery than someone who is not obese
- are at risk of wound infections after surgery

